

REPORTS INVENTORY						CONTROL NO.	
PREPARE IN DUPLICATE							
1. TITLE OF REPORT (if a fill-in report include Form No.)  Quarterly Review						2. TYPE OF REPORT <input checked="" type="checkbox"/> STATISTICAL <input checked="" type="checkbox"/> NARRATIVE <input checked="" type="checkbox"/> MACHINE-NAME LISTING	
3. FUNCTIONAL AREA		PERSONNEL		TRAINING		ADMIN. GENERAL OTHER (specify)	
		LOGISTICS		SECURITY			
		MEDICAL		FINANCE			
4. NO. OF COPIES PREPARED  12		5. FREQUENCY (weekly, monthly, quarterly, etc.)  Quarterly				6. DISTRIBUTION (No. of components not number of copies)  4	
7. FORMAT (memorandum, form computer print-out, etc)  Computer print-out		8. ADP PROCESSING				9. DIRECTIVE AUTHORITY REQUIRING REPORT  DDS&T	
		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		IF YES GIVE ADP PROCESSING NO.			
10. PREPARING COMPONENT (include lowest level contributing information to report)  DDS&T, Mgt. Information Br., OCS				11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)			
12. COST FACTORS							
A. MANUAL PREPARATION AND REVIEW COSTS							
GRADE	HOURLY RATE	<input checked="" type="checkbox"/>	HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/>	TIMES PREPARED = COST PER YEAR
B. COSTS OF COMPUTER PRODUCED REPORTS							
TOTAL COSTS PER YEAR						\$ 6,545.04	
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.							